HOMEOWNER VERIFICATION for ELECTRICAL WIRING PERMITS

STATE OF NEBRASKA State Electrical Division 800 South 13th Street, PO Box 95066 Lincoln, NE 68509-5066

	, states the following:
(Pr	rint Your Full Name On Line Above)
1.	I am the owner of the single-family dwelling located on the residential property for which am applying for a State Electrical Permit. The complete address for the residence is:
	Address:
	City:County:
2.	I live in, the single-family dwelling located on the residential property for which I am applying for an electrical permit, and it is my principal residence.
3.	I will install and connect the electrical wiring for myself, without compensation or pay from or to, any other person.
4.	I have sufficient knowledge of National Electrical Code requirements to make an electrical safe and mechanically secure installation, which will meet the minimum standards of that Code edition referenced in Neb.Rev.Stat.§81-2104.
5.	I am aware that a separate permit is required for a temporary service.
6.	I am aware an inspection is required before any wiring is concealed behind walls, floors, ceilings, or earth, and final inspection is required at the completion of the project.
7.	I will call the State Electrical Inspector whose name and telephone number is on the permit job-site card to schedule an inspection. I am also aware that it is not the inspector's job or duty to be my instructor in electrical wiring.
8.	I am aware the Neb.Rev.Stat.§81-2143 makes it a Class I misdemeanor to make a false statement on a request for an inspection.
9.	By signing this form and forwarding it to the State Electrical Division office with my Application for Electrical Inspection and fee, I am stating the above information is true and correct.
<u>—</u>	omeowner/Applicant Signature Date